RESERVED FOR FILING OFFICE



Chippewa Cree Tribe

EFFECTIVE FINANCING STATEMENT

Filing Fee = \$7.00

In the space below, type the name and address where you want the Montana Secretary of State's office to send your confirmation letter.

Return Name:

			Contact Phone Number:				
TOR'S Exact Full "Legal" N	Name - Only one deb	otor name (1a <u>or</u> 1b)					
1a. Organization's Name							
or 1b. Individual's Last Name		First Name	First Name Middle Name		Suffix		
		T HOC TAINS	Wildele Heime				
1c. Mailing Address		City	State	Postal C	ode	Country	
1d Tay identification number 1 de Dalie 2 O'							
identification number	Te. Debtor's Sign	nature					
	II "Legal" Name - C	Only one debtor name (2a <u>c</u>	<u>or</u> 2b)				
2a. Organization's Name							
2h Individual's Last Name		First Name	Name Middle Name		Suffix		
25. marvidudi 5 Edot Namo		T HOC HAINS	Wildele Name		Outlix		
2c. Mailing Address		City	State	Postal C	ode	Country	
identification number	Ze. Debtor's Sigr	nature					
	nly one secured party	y name (3a <u>or</u> 3b)					
3a. Organization's Name							
or 3b. Individual's Last Name		Firet Name	Middle Name		Suffix		
		1 iist ivaine	Wilddie Warrie				
Bc. Mailing Address		City	State	Postal C	ode	Country	
old Consumed Destrict Company							
cured Party's Signature							
	The foll	owing table is for specifi	c Farm Products only				
Specific Farm Product	Crop Year		Montana County F		Farm Product Quantity/Description		
	_						
	1a. Organization's Name 1b. Individual's Last Name ling Address tidentification number tional DEBTOR'S Exact Furum 2a. Organization's Name 2b. Individual's Last Name ling Address tidentification number URED PARTY'S Name — Orman 3a. Organization's Name 3b. Individual's Last Name	TOR'S Exact Full "Legal" Name - Only one detail. Organization's Name 1b. Individual's Last Name ling Address tidentification number 2a. Organization's Name 2b. Individual's Last Name ling Address tidentification number 2b. Individual's Last Name ling Address tidentification number 2e. Debtor's Signus URED PARTY'S Name - Only one secured party 3a. Organization's Name 3b. Individual's Last Name ling Address cured Party'sSignature The foll	TOR'S Exact Full "Legal" Name - Only one debtor name (1a or 1b) 1a. Organization's Name 1b. Individual's Last Name First Name Ing Address City tional DEBTOR'S Exact Full "Legal" Name - Only one debtor name (2a or 2a. Organization's Name 2b. Individual's Last Name First Name City City Cidentification number 2e. Debtor's Signature URED PARTY'S Name - Only one secured party name (3a or 3b) 3a. Organization's Name 3b. Individual's Last Name First Name City City	TOR'S Exact Full "Legal" Name - Only one debtor name (1a or 1b) 1a. Organization's Name 1b. Individual's Last Name First Name Middle Name	TOR'S Exact Full "Legal" Name - Only one debtor name (1a or 1b) 1a. Organization's Name 1b. Individual's Last Name First Name City State Postal C City State Postal C	TOR'S Exact Full "Legal" Name - Only one debtor name (1a or 1b) 1a. Organization's Name 1b. Individual's Last Name First Name Middle Name Suffix State Postal Code Identification number 1e. Debtor's Signature Itional DEBTOR'S Exact Full "Legal" Name - Only one debtor name (2a or 2b) 2a. Organization's Name 2b. Individual's Last Name First Name Middle Name Suffix State Postal Code Identification number 2c. Debtor's Signature URED PARTY'S Name - Only one secured party name (3a or 3b) 3a. Organization's Name Suffix The following table is for specific Farm Products only	